



MIAMI BEACH

NON-CERTIFIED POLICE OFFICER (POLICE OFFICER TRAINEE) PRE-SCREENING QUESTIONNAIRE

Name _____ DOB _____ Date _____

Classification: _____ Telephone: _____
(home) (work) (beeper/cell/other)

Mailing Address City State Zip

You are about to complete the pre-screening questionnaire. It is important that you carefully read each question. If you do not understand any part of this form, please ask for clarification.

You must answer the following questions truthfully and accurately. Any facts that are obtained through the investigation process, that you have omitted or falsified during the completion of this form, are grounds for disqualification or dismissal from the position you are seeking.

If additional space is needed for you to completely document your responses, additional sheets of plain paper may be used.

If you completely understand these instructions and are prepared to proceed, please sign and date.

I understand that if I am contacted by the background investigation unit and deemed disqualified according to the Human Resources and Risk Management Department Procedures, I may not proceed to the testing phase at this time.

Pending review of your Pre-Screening Questionnaire, you may be disqualified from further participation in the recruitment.

Signature Date

For office use only:

Applicant status: _____

DQ reason: _____ Applicant contacted date: _____ phone: _____ mail: _____

Ok to proceed: _____ NOTE: _____
(investigator initials)



MILITARY EXPERIENCE

- _____

- _____

- _____

-



- YEAR _____ If yes, explain _____

YEAR _____ If yes, explain _____

- YEAR _____ If yes, explain _____

a. in the last week d. 1 year ago g. 5 or more years ago
b. between 2 and 3 weeks ago e. 2 years ago h. not applicable
c. between 1 and 11 months applicable f. 3-4 years ago



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14. Have you used any of the following substances? (write a yes or no in the first column and if yes, month and year in the second and third columns; the total in the fourth column; your age and the last time you used it.)

	Yes/No	Year First Time	Year Last Time	How many Times (Total)	Last Usage (Age)
Marijuana	_____	_____	_____	_____	_____
Cocaine	_____	_____	_____	_____	_____
Quaaludes	_____	_____	_____	_____	_____
Amphetamines (Speed)	_____	_____	_____	_____	_____
Barbiturates	_____	_____	_____	_____	_____
LSD	_____	_____	_____	_____	_____
PCP	_____	_____	_____	_____	_____
Heroin	_____	_____	_____	_____	_____
THC	_____	_____	_____	_____	_____
Hashish	_____	_____	_____	_____	_____
Inhalants	_____	_____	_____	_____	_____
Designer drugs (Ecstasy)	_____	_____	_____	_____	_____

15. Have you ever used any other illegal substance not listed above?

a. yes b. no

What? _____ How many times? _____
First time (Year) _____ Last time (Year) _____

16. Have you ever used a forged prescription to purchase a prescribed controlled substance?

a. Yes b. No

YEAR _____ If yes, explain

17. Have you ever used steroids without a prescription?

a. yes b. no

What? _____ How many times? _____
First time (Year) _____ Last time (Year) _____



LEGAL

Have you ever committed any of the following? If your answer is yes, explain.

18. Intentionally setting a fire (ARSON).

a. Yes

b. No

YEAR _____ If yes, explain

19. Signing another person's name to a document without authorization (FORGERY).

a. Yes

b. No

YEAR _____ If yes, explain

20. Theft of money or other valuables entrusted to you (EMBEZZLEMENT).

a. Yes

b. No

YEAR _____ If yes, explain

21. A forcible sex act or rape.

a. Yes

b. No

YEAR _____ If yes, explain

22. Engaged in sexual activities with children.

a. Yes

b. No

YEAR _____ If yes, explain

23. Have you ever exchanged, sold, supplied, or delivered any marijuana, cocaine, or any other type of drug to other person?

a. Yes

b. No

YEAR _____ If yes, explain



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24. Have you ever patronized a prostitute?

a. Yes

b. No

YEAR _____ If yes, explain

25. Have you ever been arrested or signed a promise to appear affidavit (Will Appear Arrest)?

a. Yes

b. No

YEAR _____ If yes, explain

26. Have you ever been convicted, adjudicated guilty, adjudication withheld or plead Nolo Contendere of a felony or misdemeanor?

a. Yes

b. No

YEAR _____ If yes, explain

27. Have you ever slapped, punched, or otherwise injured a spouse, or significant other

a. No

c. yes, on 2 or 3 occasions

b. yes, on one occasion

d. yes, on 4 or more occasions

YEAR: _____ If yes, explain

DRIVING RECORD

28. Have you ever been arrested for DUI/BUI (driving/boating under the influence of alcohol or drugs)?

a. Yes

b. No

YEAR _____ If yes, explain

Date _____ Disposition _____